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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/689,968	RECEIVED CENTRAL FAX CENTER OCT 06 2005
	Filing Date	11/08/2001	
	First Named Inventor	Rainsford, Patrick J.	
	Art Unit	2811	
	Examiner Name	Chowdhury, Sumalya A.	
Total Number of Pages In This Submission	12	Attorney Docket Number	EMU-1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request For Correction to Filing Receipt
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	SEYFARTH SHAW LLP		
Signature			
Printed name	TIMOTHY J. KEEFER		
Date	10/06/2005	Reg. No.	35,567

CERTIFICATE OF TRANSMISSION/MAILING (FAX TO 571-273-8300)	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	TRINIDAD ESCOBEDO
Date	10/06/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

OCT 06 2005

Atty. Docket No. EMU-1

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CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

The undersigned hereby certifies that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on this 6th day of October, 2005.Date: 10/6/05By: Trinidad EsobedoPrint Name: TRINIDAD ESOBEDO

Applicant: Rainsford, Patrick J.

Examiner: Chowdhury, Sumaiya A.

Serial No.: 09/889,966

Art Unit: 2611

Filed: November 8, 2001

For: INTERACTIVE SYSTEM

Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231REQUEST FOR CORRECTION TO FILING RECEIPT

Sir:

Attached is a copy of the official Filing Receipt received from the PTO in the above application.

There is an error with respect to the Title field. The Title field should read "INTERACTIVE SYSTEM". Attached herewith is a copy of the executed Combined Declaration and Power of Attorney as filed on November 8, 2001 showing the title as same.

The correction is not due to any error by Applicant and no fee is due. The Commissioner is hereby authorized to charge any required fee to Deposit Account No. 19-1351. Issuance of a corrected Filing Receipt is respectfully requested.

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